



TRANSIENT MERCHANT BLANKET LICENSE APPLICATION
(Chapter 4.56 of the Sioux City Municipal Code)

Date: \_\_\_\_\_

ANNUAL BLANKET LICENSE [ ] SINGLE EVENT \_\_\_\_\_

1. Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

2. Licensed Location: \_\_\_\_\_

3. List Owner(s)/Manager(s) of the Location: \_\_\_\_\_

Address: \_\_\_\_\_

Date of birth: \_\_\_\_\_ SS #: \_\_\_\_\_ Phone: \_\_\_\_\_

4. Dates License to be Effective: \_\_\_\_\_

5. Proposed Location of Sales\*: \_\_\_\_\_

Lease or Written Permission from Property Owner Required: Yes [ ] No [ ] If yes, attach a copy to this application.

\*If on City Property you must obtain permission from the City Property Office or Public Works Department.

6. How will sales be made: \_\_\_\_\_

7. Merchandise/service to be sold/offered for sale: \_\_\_\_\_

8. A \$1,000 Surety Bond is required to be submitted for all Transient Merchant Blanket Licenses.

9. Transient sales history for the past 3 years:

Dates

Location/Address/PO Box

Nature of Business

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Have you previously applied for or held a transient merchant's license in Sioux City: Yes [ ] No [ ]

If yes, was it ever denied or revoked: Yes [ ] No [ ] If yes, explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Has anyone listed on this application been convicted of a felony within the last five years: Yes [ ] No [ ]

If yes explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

